THE HAMPDEN HIPPOCRAT

The Hampden District Medical Society Newsletter

FALL 2004 VOLUME 12

President's Annual Message:

SAVE OUR SINKING SHIP!

I'm glad to serve as president of the Hampden District this year. I want to talk about how we can affect change.

Doctors are being squeezed onto a sinking ship! Some of us even believe that physicians are being taunted as our soul is being squeezed out of us, as we're shoved together into a sinking ship. And to a few physicians, the future looks hopelessly bleaker! Worse than that; for some physicians the scenario is seemingly fine. For the rest of us who want out, who want to practice medicine free of those taunts, threats, and shackles, join us. For those of you who want to organize for a better future, read on.

Many of us hope that our condition is still repairable, and that we, the doctors of the Hampden District, will unite to avoid a further plunge. I think we can, and must. And we need to accomplish this in both big ways and in small ways.

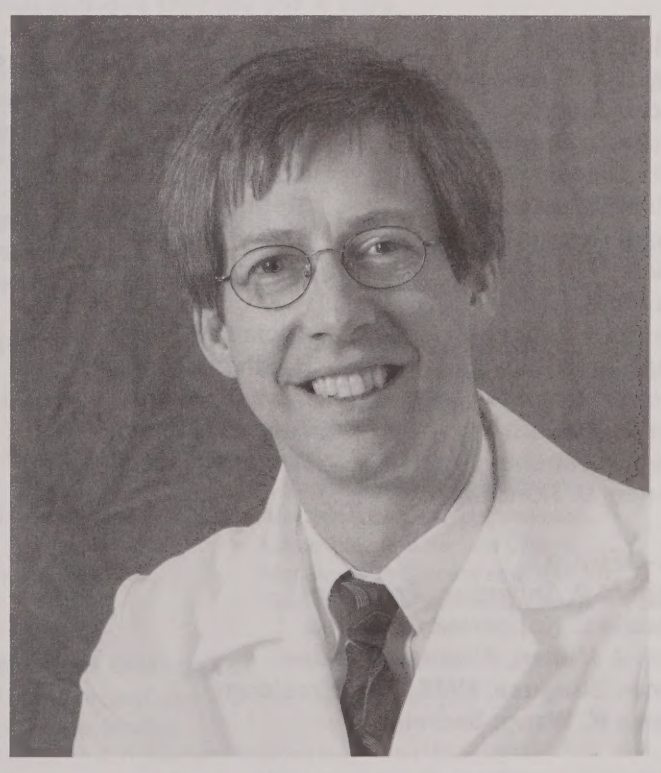
Take for example a change we need to affect with Health New England's x-ray pre- certification policies. We're doing it with Harvard Pilgrim on a statewide scale. I recently saw a patient with an acute drop-foot. He had a history of back surgery, and his labs were normal. It was 5:45 p.m. on Friday, and my office staff bolted at five o'clock to enjoy the weekend. So I call the MRI myself and have him to the MRI and studied by 7 p.m. The symptoms warranted an urgent MRI; no one can argue that one. The problem was his insurance later refused to pay for the MRI because it wasn't pre-approved. In spite of sending the office notes with those red-flagged signs and symptoms, the MRI was declined, and payment was again refused. I was informed that I could appeal this to HNE's "radiology gatekeeper". Immediately after dialing the toll free number I was greeted by a recording that sternly admonished me to tell the truth, or I will be criminally prosecuted. Then course I have to wade through several buttons, only to end up at a recording telling me that the doctor-reviewer is busy. I am very busy myself. I left a message explaining that I was going to relate this story to the whole of Hampden District. The doctor called me back within 10 minutes. Without hesitation he approved the MRI, and all seems well. Or is it? Are they now investigating the truth of my statements, so that they can potentially have me arrested?!

In a less urgent instance, involving HNE's radiology gatekeeper, I call to request an MRI for a dentist and patient who presents with a clear-cut radiculopathy, positive straight leg raise, and difficulty with walking, working, and sleeping. He wants to know the cause of this problem. I want a MRI to generate a prognosis and treatment plan. He has already tried various meds, as well as rest and swimming, and after months of symptoms, he wants an answer. The same gatekeeper denied my request for a MRI. They say that the patient needs to try physical therapy for six weeks. Well, he doesn't want to until he sees a MRI. (He's tried both rest and swimming on his own, but not in an organized, documented P.T. program.) Among neurosurgical patients, many patients will improve with time or with therapy and time. But now and again people get worse or don't improve, and their pain scenario drags out. He wants a MRI, I want a MRI. Too bad.

Finally, lots of patients are coming to me upset with their doctor or the system, because their doctor wouldn't, or couldn't get a MRI, until their symptoms became unbearable. The average new patient that I see is now on higher doses of narcotics, even before they get their MRI or finally get to see me. Doctors, tired of wasted telephone time, excessive paperwork, and difficult appeals, aren't just ordering less MRI's, they're ordering too few and too late.

Now I have a suggestion. It's called doctor-insurer dialogue. Only let's do this together with several PCP's and internists, radiologists and specialists in a pleasant organized fashion. Let's sit down with the insurers and make our case. You see, this very scenario occurred this spring with regards to Harvard Pilgrim, and those who met it head-on were doctors of the State Medical Society. We met with Harvard Pilgrim and the radiology gatekeeper, and carved out a compromise. It worked.

We can think of many more causes to press for. But we need to back our causes with numbers. I mean physician numbers; our group must be large united and energized. We need to sail our ship to calmer waters, with teamwork. So get involved, get your colleagues involved. I'll be organizing groups throughout the year for various causes. If you have a cause, let me know. If we fail, we sink. If we prevail, our practices prevail, our patients will benefit, and we'll still be able to afford to practice medicine here in Western Massachusetts.



Richard P. Anderson, M.D.
President 2004-2005

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Constance Fedora — Administrative Assistant

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Suzanne Skibinski, Executive Director
Heather Z. Sankey, M.D., Guest Editor

LETTER POLICY

Letters to the editor should be approximately 250 words or less, preferably typed in Word and e-mail to hdms@massmed.org, or faxed to **(413) 731-8990**. Please provide the full name and address of the writer. All letters are subject to editing. Please note, the Editor is not responsible for typos and if correction is needed it will be in the following Newsletter.
Or mail to:

The Hampden Hippocrat
1111 Elm Street, Suite 22
West Springfield, MA 01089

The "Hampden Hippocrat Newsletter" is the news media of the Hampden District Medical Society and would like to become the forum for sharing information and opinions amongst the members, for whom it is being created. Any article printed expresses the opinion of the author and should not be construed to imply endorsement by the Society members.

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EDITOR'S COLUMN

Heather Sankey, M.D.

As you've probably noticed by now, this edition of the Hampden Hippocrat is filled to bursting with pieces by our physician members. Many of the articles deal with different kinds of balancing. Dr. Rick Anderson writes about the precarious balance between providing excellent patient care and the frustrations of low reimbursement and still keep our offices open. Dr. Teresa Klich-Nowak and Dr. Shirin Nash write in honor of Women in Medicine Month about how we balance the demands of being a female physician with the roles of wife, mother, daughter, etc. Carol writes about physicians who are driven to the point that they just give up and drop out of practice after dedicating years to their training. Read these columns and think about how happy you are with your life balance.

This newsletter is also filled with stories of physicians who volunteer their time outside of medicine. We may volunteer for a medical society because we're frustrated with insurance companies or threats of malpractice or bureaucratic red tape. We may reach outside of our clinical practice to help the victims of domestic violence in a different way. Or we may volunteer to mentor a high school student who is interested in science. Read these stories, and ask yourself if you're reaching out to the world around you.

Every activity that we add to our responsibilities threatens to throw off the precarious balance we've achieved between life and work – yet I would argue that being active in our community helps to improve our emotional balance. This may in turn decrease stress.

So read through the Hampden Hippcrat. Laugh, nod with understanding, or challenge the contents: whichever suits your mood and

temperament. But as you read, join with us in celebrating the wide range of physician experiences that are described within. There are invitations galore: to evening social events, to join a committee, to reach out to others.

- Does your daily life have a healthy balance of work and play? If not, come socialize with us at the Basketball Hall of Fame (see page 11).
- Are you feeling stressed and overworked? Then join us for a night of Pilates and massage (see page 12).
- Are access issues for patients driving you nuts? Then join a working group to improve access to care for patients, or join a committee already in existence (see page 23).
- Are you worried about the future of medicine? Then mentor a high school student who may be a doctor one day (see page 15).

These are just a few of the opportunities listed within. Find one that's right for you, and join us.

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FROM THE EXECUTIVE DIRECTOR'S DESK

Welcome Dr. Richard Anderson 2004-2005 President

A long list of factors is causing stress for my physicians. They are seeing an implosion of the physician workforce, as the practice environment in Massachusetts is driving good physicians out, and discouraging new ones from coming in…

The Massachusetts Medical Society is working on numerous fronts to address the multitude of challenges facing our physicians.

Hampden District Medical Society is fortunate to have Dr. Richard P. Anderson, a busy Neurologist in solo practice in Springfield and Pittsfield as their 164th President. Dr. Anderson will be addressing some of these challenges.

Dr. Anderson's first challenge was to address recruitment. This past summer he sent 400 non-member recruitment letters to all of which a personal note was added.

In his letter, Dr. Anderson said, "As physicians we face constant affronts to our once noble practice, which if left unchecked will lead to an inevitable crisis in Massachusetts. It is our duty to defend the practice of Medicine, and to advocate for our patients and ourselves and, the best way to approach these issues is to work collectively, as one large voice emanating from the Society and reaching the whole of the Commonwealth of Massachusetts".

Dr. Anderson is a graduate of the University of Connecticut School of Medicine and before returning to New England he practiced in Florida where he was a member of the Florida Medical Association.

Dr. Anderson as been an active member of the Society for almost ten years serving on the Executive Committee and as a delegate to the Massachusetts Medical Society House of Delegates.

He resides in Longmeadow with his wife Katherine and two children Erica and Michael.

To show your support, please join with your colleagues and me in welcoming Dr. Anderson by attending the fall district meeting on September 21, 2004

By: Suzanne T. Skibinski

HDMS Sponsored Activities

Fall District Meeting
Annual Family Night
Tuesday, September 21, 2004
Basketball Hall of Fame
Guest: Rebecca Lobo
CME: **The Lake Placid Olympic Training Center**
"Is there a Doctor on the Bobsled?"
Speaker: Catherine O'Connor, M.D.

Thursday, September 23, 2004
Momentum The Pilates Center
HDMS Winter District Meeting
Tuesday, January 25, 2005, 6:30 p.m.
Best Western Sovereign Hotel, West Springfield
Healing the System: The AMA Plan to Rescue U.S. Medicine
J. Edward Hill, M.D., AMA, President-Elect
Grand Rounds
J. Edward Hill, M.D., AMA, President-Elect
Wednesday, January 26, 2005
Baystate Medical Center, 8:00 A.M. - 8:45 A.M.
Mercy Medical Center 12:00 - 1:00 P. M.
Kiwanis Club Luncheon
J. Edward Hill, M.D., AMA, President-Elect
Wednesday, January 26, 2005, 12:00 Noon
Best Western Sovereign Hotel, West Springfield
Medico-Legal Forum
TBT
High School Doctor for a Day
Thursday, April 7, 2005
HDMS Annual Meeting
Tuesday, April 26, 2005
Legislative Breakfast
Friday, April 29, 2005

Massachusetts Medical Society Governance Meetings and Deadlines 2004-2005 Society Headquarters, Waltham, 10:00 a.m.

September 8, 2004	**Meeting with District and Specialty Presidents, Committee and Section Chairs**
October 6, 2004	**Meeting with District Presidents, Committee and Section Chairs**
December 15, 2004	**Meeting with District Presidents, Committee and Section Chairs**
February 9, 2005	**Meeting with District Presidents, Committee and Section Chairs**
April 6, 2005	**Meeting with District and Specialty Presidents, Committee and Section Chairs**

House of Delegates

First and second sessions convene at 9:00 a.m.
2004 Interim Meeting
November 5 & 6, Sheraton Framingham Hotel, Framingham
2005 Annual Meeting
May 12 & 13, 2005, Seaport Hotel and World Trade Center, Boston

Resolution and Report Deadline

All resolutions and reports should be forwarded to the Speaker in care of the MMS Department of Governance Meetings and Services

Governance Meeting Directory

Month-at-a-Glance

September 21, 2004	Resolution and Report Deadline for the 2004 Interim Meeting
October 6, 2004	Board of Trustees Meeting
October 15, 2004	Delegates Handbook to mail
October 26, 2004	Late-File Resolution and Report Deadline
November 5-6, 2004	Interim Meeting, Sheraton Framingham Hotel, Framingham
December 15, 2004	Board of Trustees Meeting
February 9, 2005	Board of Trustees Meeting
March 28, 2005	Resolution and Report Deadline for the 2005 Annual Meeting
April 6, 2005	Board of Trustees Meeting
April 21, 2005	Delegates Handbook to mail
May 2, 2005	Late-File Resolution and Report Deadline
May 12-13, 2005	Annual Meeting, Seaport Hotel and World Trade Center, Boston

MMS COMMITTEES 2004 – 2005

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Trustee: Claudia L. Koppelman
Alternate: Mark J. Mullan

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Vice Chair: Stephen A. Metz
Alternate: Jeffrey L. Kaufman

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Member: Mark J. Mullan
Alternate: Heather Z. Sankey

Tax Supported Medical Care

Member: Mark M. Sherman
Alternate: Dennis S. Gordan

At-Large Member of the Board of Trustees:
Claudia L. Koppelman

Standing Committees Appointed by President-Elect

Membership

Vice Chair: Alicia O.M. Ross

Committee on Bylaws

Heather Z. Sankey

Ethics & Discipline

Julia Gates
Laurence Lundy

Judicial Committee

Francis D. Horrigan

Finance

Claudia L. Koppelman

Committee on the Quality of Medical Practice

Stephen A. Metz

Recognition Awards

Mark J. Mullan

Geriatric Medicine

Lawrence H. Bernstein
Maura Jo Brennan

Managed Care

Richard P. Anderson
James K. Wang
Thomas G. Magill

Maternal & Perinatal

Gabriel M. Cohn
Glen R. Markenson
James K. Wang

Medical Service

Gabriel M. Cohn

Nutrition

Professional Liability

Catherine E. O'Connor

AD HOC COMMITTEE

Physician Preparedness

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Demystifying Disease Management: What Physicians Need To Know For Their Patients And Their Practices

A new brochure, **Demystifying Disease Management: "What Physicians Need to Know For Their Patients And Their Practices"** created by Private Sector Advocacy is available by contacting Susan Close at the American Medical Association 312-464-4835 or Steve Ellwing at 312-464-4367.

The Brochure poses some common scenarios, involving the physician, the patient, and the disease Management Company, related to the medical management of chronically ill patients. This Brochure provides a definition of disease management (DM), explains the DM process, and outlines some of the positive and negative impacts that DM practices can have on the physician's practice.

Some interactive strategies are offered to assist the physician when a DM program adversely affects the patient's health, a physician's practice or the patient-physician relationship.

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WELCOME NEW MEMBERS

ANESTHESIOLOGY
Pratibha Vagal
Noble Hospital, Westfield

CARDIOLOGY
Lisa Massie
Baystate Medical Center
Springfield 4

DERMATOLOGY
Glenn P. Genest
New England Dermatology
3455 Main Street, Springfield

HEMATOLOGY
Helen Ryan

D'Amour Center for Cancer Care
3550 Main Street, Springfield

HEMATOLOGY/ONCOLOGY
Masih Farooqui
Hampden County Physician Associates
77 Boylston Street, Springfield

NEPHROLOGY
Barbara Greco
300 Birnie Ave, Springfield

ONCOLOGY
Michael Yunes
P.V. Radiology/Oncology
3550 Main Street, Springfield

PEDIATRICS
Karen Shore
Meadows Pediatric, 734 Bliss Rd., West Springfield

Dilipkumar Vagal
Wing Memorial Hospital, Palmer

PHYSICAL MEDICINE & REHABILITATION
Raymond Auletta
Pioneer Spine & Sport, 1275 Elm St. West Springfield

PSYCHIATRY
Susan Cary
(please call 736-0661 for location)
Aloysius L. Davis
1200 Converst Street, Longmeadow
P.R. Geronimo-Flores
235 Chestnut St, Springfield

RADIATION ONCOLOGY
Barbara Carton
Center for Oncology - Mercy Medical Center
271 Carew St., Springfield

SURGICAL ONCOLOGY
James Frank
2 Medical Center Drive, Springfield

ORTHOPEDICS
Louis Adler
New England Orthopedic Surgeons
300 Birnie Ave, Ste 201

SURGERY
Alexander Kurbanov
Western New England Renal & Transplant Assoc.
300 Birnie Ave. Ste 300, Springfield

THORACIC SURGERY
Keith Mortman
Baystate Thoracic Surgical Assoc.

FELLOWSHIP/RESIDENT & SPECIALTY, BMC
Krishna Berman, Internal Medicine
Joseph DeAngelis, Orthopedics
Jennie Howland, Pediatrics
Liron Pantanowitz, Cytopathology

EMERITUS
Abdul Khadra

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FUTURE PHYSICIAN REIMBURSEMENTS ON SHAKY GROUND

The letters **SGR** don't stand for **S**haky **G**round **R**ealisms, but the letters do have a lot to do with the reality of the unstable ground upon which our future physician Medicare reimbursements lie. If the Congress had not recently acted with mandating 1½ % increases in physician Medicare reimbursements for this year and next, we physicians would have received a 4½% decrease in our Medicare reimbursement for 2004, and again probably in 2005. While the increase sounds good, we physicians must pay it back *with interest* in the coming years! Consequently, medical reimbursements to physicians will almost certainly be decreased every year between 2006 and 2011, unless Congress enacts laws to change the **SGR** (sustainable growth rate) formula. And if we consider that Medicaid, Workers Comp, and most insurers pay their physicians based on the Medicare fee schedule, we need to be very concerned about our future.

Hold off on the SGR for now. Consider the bigger and complicated formula by which Medicare determines physician reimbursement. That is based on three factors: RBRVS (the resource-based relative value scales), GPCI (the geographic practice cost index), and CF (the monetary conversion factor). The actual formula is bulky: (Work relative value unit or wRVU x GPCI) + (Practice expense relative value unit or pRVU x GPCI) + (Liability Insurance relative value unit or wRVU x GPCI) added together and then multiplied by the conversion factor (CF), to equal our reimbursement. Typical declines in reimbursements since 1995 are the result of changes in the practice expense component and/or reductions in the value assigned to work, the wRVU.

The current crisis however is centered on the conversion factor (CF), also termed the *update*, and it affects **all** physician reimbursements. It isn't specialty specific; we are all affected similarly. The harsh reality is that the decreases in the conversion factor could cut Medicare reimbursement rates by almost half to all physicians over the next 10 years.

The conversion factor (CF) is determined by the Sustainable Growth Rate formula or **SGR**. Under the SGR, the Centers for Medicare and Medicaid Services estimate a year's expenditure target for physician services. This target is determined by medical inflation, the gross domestic product, changes in laws and regulations, and by the number of beneficiaries enrolled (ie; Medicare fee-for-service patients, which continue to grow in number due to baby boomers coming of age. The greater that number is, the poorer it will affect us with reimbursements overall). If Medicare spends an amount on physician services that is greater than the expenditure target, physician reimbursement receives a negative update, ie; the conversion factor (CF) is decreased, and we get paid less. If actual spending is less than the target, CF is increased, and we are reimbursed more. Between 1998 and 2003, physicians received respective updates of 2.3%, 5½%, 5.9%, -4.8%, and 1.6%. (The latter after Congress intervened; preventing what would have been a 4½ % cut.) In 2004, we know that this -4½ % update (it is more like a *down*date) was required under the SGR. It was reversed via the Medicare Prescription Drug Improvement Modernization Act, which stopped that cut and replaced it with the 1½ % increase we received for this year, and again for next year. The money to fund this increase, sorry to say, will be deducted from future updates, with interest. So, while Congress has enacted physician-friendly legislation over the past three fee schedules, they haven't fixed the main problem, which are the failings contained within the SGR formula. As long as growth in the gross domestic product is slowed, and as long as actual expenditures exceed the expenditure target (which is the case for a number of years in a row now), we'll continue to see predicted decreases in our medicare reimbursements. It is a cumulative effect, so that exceeding expenditure targets in one year doesn't just impact

the next year's update; we will feel it in all future updates.

The sum of having to pay back the "gifts" of 2004 and 2005, plus slow growth in the gross domestic product, and repeatedly spending more than the expenditure target, lead everyone to one universal prediction; we will see purely **negative** physician updates of between –2 % to -7% (the most allowable by law) over the next decade. The Centers for Medicare and Medicaid Services (CMS) estimates are even worse; that the higher negative updates of -7% are going to occur annually. Therefore by CMS estimates, physician Medicare reimbursements may be cut nearly in half by the year 2013. One thing to our benefit is that it's predicted that a significant portion of the Medicare population will enroll in HMO's over the next ten years, which will help to reduce the expenditure target. However, if trends continue, and HMOs and Worker's Comp base their reimbursements on Medicare's fee schedule, we can expect that those reimbursements will also go down by nearly half of their already low current values. Did you know that Massachusetts Workers Comp physician reimbursement rates are already the **lowest in the nation**?

The AMA and many specialty organizations have been lobbying politicians for a fix, and have met with the CMS and General Accounting Office to discuss the future of Medicare and physician reimbursement. Unfortunately, as in the case of most of the medical agenda proposed to our legislatures, while they agree that there is a problem, they have no idea or few ideas for a solution, or can't agree on a solution. Add to that the fact that the national budget is running in a wartime deficit; we don't have much optimism that Federal funds will become available for a fix. To further complicate things the Medicare Prescription Drug Benefit is going to cost more than was initially estimated.

We as physicians aren't going to be able to afford a future in medicine if these bleak predictions come true. How can we then afford to run our offices, pay staff, complete all the paperwork, pay overhead, pay the ever-increasing malpractice insurance fees, pay ourselves (there won't be anything left), and stay in business to **care for patients**? We must deliver that message loud and clear. It is likely that the House of Representatives will meet on these issues soon. In addition, Senator Jim Bunning R-KY has asked the Senate to devise a fix for that SGR formula. We can only hope that a responsive legislature can meet the challenges that we as physicians face, because it will affect everyone. Here in the Hampden District, and together with the state medical Society, the AMA and specialty lobby efforts, we must work together, in great numbers, with a loud voice, to preserve our future, and the future of health care.

Much of this information was gleaned from research by Barbara Peck JD, AANS Washington Office, and data from the AMA website.

By: Dr. Richard P. Anderson

Women In Medicine

THE WOMAN IN YOUR LIFE

The woman in your life will do what she must do
to comfort you and calm you down and let you rest now
The woman in your life... she can rest so easily
she knows everything you do
because the woman in your life is you.

The woman in your life knows simply what is true
she knows the simple way to touch,
to make you whole now
The woman in your life... she can touch so easily
She knows everything you do
because the woman in your life is you.

And who knows more about your story,
about your struggles in the world?
And who cares more to bless your weary shoulders?
Than, the woman in your life, she's trying to come through
A woman's voice with messages of woman's feelings
And the woman in your life, she can feel so easily
She knows everything you do
because the woman in your life is you.

And who is sure to give you courage?
And who will surely make you strong?
And who will bear all the joy that is coming to you?
If not, if not ... the woman in your life, she's someone to pursue

She's patient and she's waiting and she'll take you home
Now... the woman in your life, she can wait so easily,
she knows everything you do
because the woman in your life is you...

Alix Dobkin

With September being designated as "Women in Medicine" month, the Hampden District Medical Society would like to pay tribute to all the dedicated women physicians who are members of our organization.

Our Hampden Women In Medicine

Mary Alice Abbott
Michelle Adams
Purnima Adlakha
Mary F. Adler
Lois Albury
Alice A. Angelo
Susan Anti
Rebecca B Apollon
Leslie Arpin
Elizabeth Arsenio
Raghubinder K. Bajwa
Kathleen Beith
Sandra Bellantonio
Kirsten Berman
Komal J Bhatt
Chanel G Bouchereau
Theonia Boyd
Elizabeth Boyle
Greta Boynton
Maura Jo Brennan
Carolyn J. Brown
Kimberly Browne-Martin
Tracey J. Browning
Sandra D Cameron
Elizabeth Campbell
Barbara Carton
Susan Cary
Charlene Case
Lucinda J. Cassells
Ruby R. Chang
Sheri D. Cheung
Lori E. Circeo
Geer A. Clarke
Cecilia L. Concepcion
Carolyn Couture
Debra DiSandro
Jennifer Dorantes
Nancy Dunbar
Catherine Eisenmenger
AnnMaria Elder
Shameema Faruqi
Karen M. Ferroni
Roxanne Florence
Katherine O. Freeman
Jonna Gaberman
Sabha Ganai
Julia Gates
P. R. Geronimo-Flores
Sally H. Ginsburg
Barbara Greco
Colette Haag-Rickert
Jennifer Anne Hallowell
Charlotte Harward
Micheline Heeley
Catherine Hegarty
Pamela Henderson
Maria D. Hill
Deborah Hoadley
Jennie Howland
Tereza Hubkova
Rachel A. Ivker
Rebecca Jones
Wandana Joshi-Ryzewicz
Eva Karacsonyi
Deborah Katz
Amy Kasper
Elinor Kelliher
Carolyn Kendall
Michelle Kinbrook
Mary King
Teresa I. Klich-Nowak
Kirti Kodali
Laura MP Koenigs
Heidi Kolek
Claudia L. Koppelman
Wen Yee Lee
Marilyn L. Levine
Shan Li
Mary Ann D. Lowen
Jo-ann E. Lynch
Sarah Lynaugh
Alison E. MacDonald
Lakshmi Madabhushi
Claire E. Magauran
Gerta Maissel
Navneet Marwaha
Zubeena M. Mateen
Claudia Martorell
Navneet Marwaha
Lisa Massie
Zubeena Mateen
Bonnie Mathews
Jill McGovern
Lauri B. Meade
Loren Mednick
Yelena Mikich
Vivian I. Miller
Theresa Mitchell
Heidi F. Moskovitz
Mina Moussavian-Assadi
Sarah H. Mullan
Victoria J. Noble
Molly Noonan
Lisa L. Norris
Catherine O'Connor
Irene S. O'Farrell
Donna L. O'Shea
Deborah Panitch
Yvonne Paris
Lisa A. Patterson
Jacqueline Pleete
Maria Polizzi
Ruth A. Pryor
Wanda Rivera
Sandra A. Rolston
Alicia O.M. Ross
Helen F. Ryan
Jill M. Samale
Anita Sandhu
Heather Z. Sankey
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Josephine ScottoDicarlo
Anne B. Shain
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Catherine Spath
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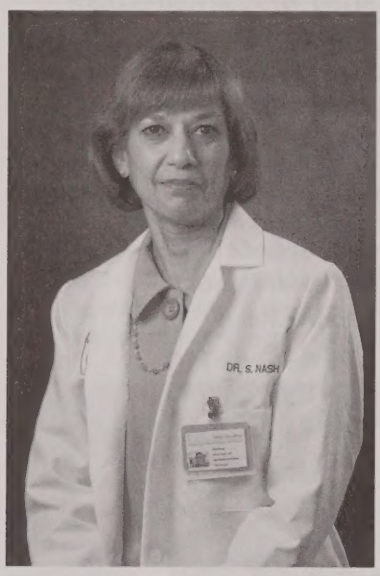
Eleanor S. Winston

"Women in Medicine- A Pathologist's Perspective"

Once again this September we celebrate women in medicine. According to AMA statistics, we are 25% of practicing physicians and 45% of medical school graduates. Even better, women made up the majority of medical school applicants for the first time ever last year. Today we are internists, pediatricians, obstetricians and even surgeons. We are professors and teachers, researchers and administrators. We are wives and mothers juggling fulfilling careers with large personal responsibilities, and Dr. Mom license plates are sprouting in hospital parking lots. But we do need to pause and remember that not too long ago, circumstances were very different. Although there are records of prominent women "physicians" in ancient Egypt, Greece and Rome, there were few women in the formal medical profession until 1900. Elizabeth Blackwell, who was a remarkable woman, overcame numerous obstacles to become the first female to graduate from Geneva Medical College, New York, in 1849. She became a pioneer in educating women in medicine and inspired many to enter the profession. Fortunately, in the past 150 years, thousands of women have pursued medical careers and their lives and achievements are being celebrated in an exhibition "Changing the Face of Medicine" at the National Library of Medicine.



Dr. Shirin Nash
Mercy Medical Center

As a pathologist, I am a member of a group of physicians referred to as the "hidden specialties" by US News and World Report. We are involved in patient care primarily through other physicians and we are also known as "the doctor's doctors". The AMA recognized pathology as the practice of medicine as recently as 1943. We analyze blood and body fluids and examine cells and small pieces of tissue on glass slides, most often with a light microscope. Our labors in this diagnostic activity allow us to guide our clinical colleagues in further management of their patients. Although most patients never see us, our skills are essential to determine the prognosis and therapy of their diseases. Our tools and techniques have not changed much since the days of Rudolf Virchow in the mid-19th century, but in the era of the Human Genome project, we can provide clinicians with increasingly specific information for more targeted therapies by using immunohistochemical techniques and molecular tests. We are also sub-specialists and support our medical and surgical colleagues by learning to speak the language of gastroenterologists, pulmonologists, gynecologists and oncologists to name just a few. It may seem surprising, that pathology is an art as well as a science and in our world of pink and blue images there are gray areas. In a small number of cases, two well-trained observers may not see eye to eye. At such times we strive to remember that "behind every slide there is a patient" and we do not hesitate to obtain second opinions from nationally known experts in our field.

Pathologists are also teachers and researchers and I have enjoyed the excitement and stimulation of being a fellow in gastrointestinal research at Brigham and Women's' Hospital, Boston. I have also had the pleasure of teaching medical students at UCLA in Los Angeles and Harvard Medical School in Boston. However, the most rewarding and challenging position I have held was as founding director of the pathology residency program at Baystate Medical Center. It was an administrative role, which came with its requisite share of headaches and heartaches, but in the end it was an honor and a privilege to be friend, guide, mentor and mother to young physicians at a time of considerable tumult and change in their professional and personal lives.

Today, as a pathologist in private practice at Mercy Medical Center, an institution founded by women dedicated to health care, I enjoy strong and supportive relationships with my male and female colleagues. I would like to use this opportunity to remind my women colleagues as we celebrate our successes, of the words of Mother Mary, foundress of the Sisters of Providence, "let us never rest in the review of what we may have done, but rather press forward to what remains to be accomplished".

Mercy Medical Center

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Opportunitites Designed Specifically for Women Physicians at the Massachusetts Medical Society Committee on Women in Medicine

Established over two decades ago, the Committee on Women in Medicine provides a valuable forum to identify, address, and educate fellow professionals about topics of concern to women in medicine. The committee serves as the primary advocate for women members, working to increase their ranks and participation within the Society and their influence within the profession. The Committee generally meets 4 times per year and encourages particpation from new women physicians.

Women Physician Lecture Series

The Committee on Women in Medicine offers networking opportunities designed specifically for women in the medical profession and sponsors the women's lecture series. Over the past year, the Committee has hosted:

- Professional Liability Reform in Massachusetts: The Implications and Consequences for Women Physicians.
- Women, Wealth and Wisdom: Personal Financial Strategies for Women Physicians
- Emerging Issues at the Board of Registration in Medicine and their Impact on Women Physicians.
- Controversies in Women's Health: Critically Evaluation the Medical Literature.

Focus Groups

Join your fellow women physician colleagues in a roundtable discussion to help identify ways that the Massachusetts Medical Society can reach out and be more relevant to the growing ranks of women in the medical profession.

If you are interested in learning more about opportunities for women in medicine or would like to suggest a topic or speaker for a future lecture, please contact Erin Riley at 800-322-2303 ext. 7413 or email: eriley@mms.org.

****

MEDICAL SPAS AT THE CUTTING EDGE

Living and working with the medical field brings stress. We carry that stress in our body and it reflects in our skin and hair. We like to maintain ourselves to minimize the effects of aging and stress we can't avoid. But the more we can learn, the easier it is to handle it more gracefully. It is not only for women. More and more men are looking into antiaging and stress relieving modalities or stress management. According to the American Society of Plastic Surgeons, 25% of their practice is for men who are having both surgical and nonsurgical cosmetic procedures done.

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Calling for nominations for:

2005 Hampden District Medical Society Award for "Community Clinician of the Year"

This annual award is sponsored by the Massachusetts Medical Society and Hampden District Medical Society and **recognizes a physician who has made significant contributions to patients and the community.** Candidates must be members of the HDMS to qualify. The recipient *chosen by their district colleagues* to receive the ***Award for Community Clinician of the Year*** will be presented their Award at our Annual District Spring Meeting. In addition the award recipient will also be recognized at the Annual MMS Meeting held in May.

Please submit nomination along with a supporting letter by January 25, 2005 to:

hdms@massmed.org
Or mail to:
Suzanne Skibinski, Executive Director
Hampden District Medical Society
1111 Elm Street, Suite 22
West Springfield, Massachusetts 01089-1540

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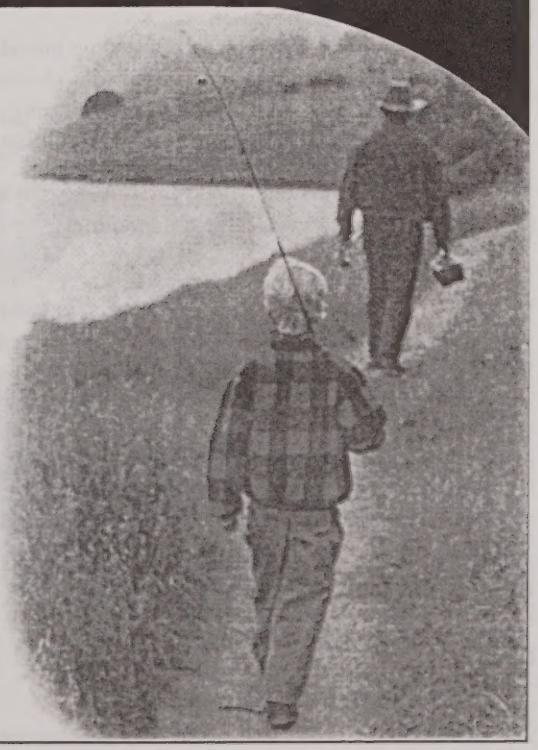

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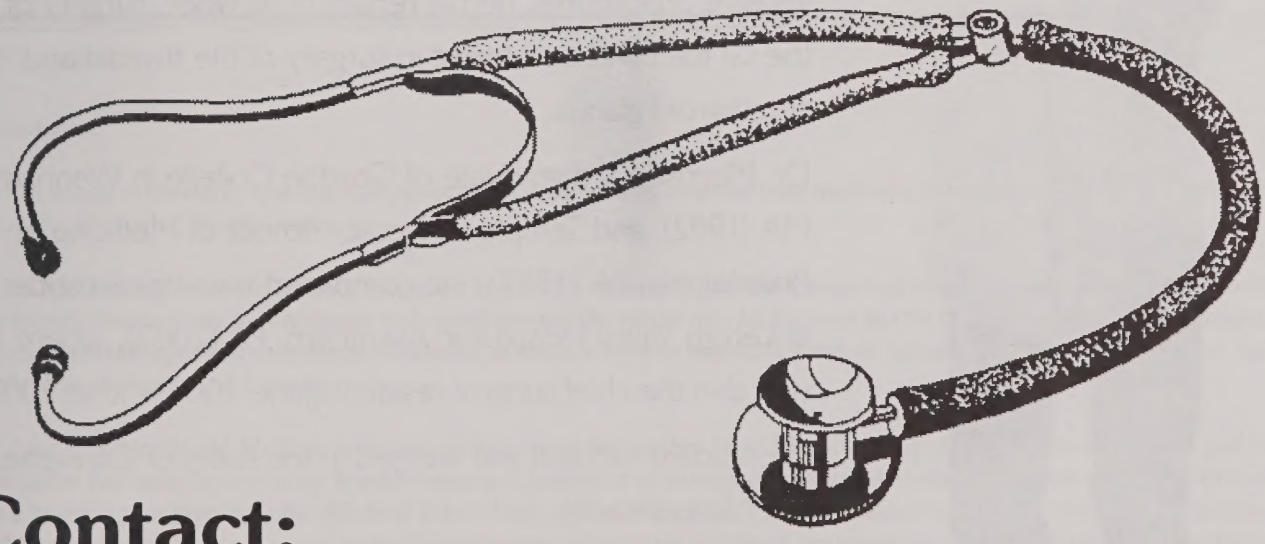
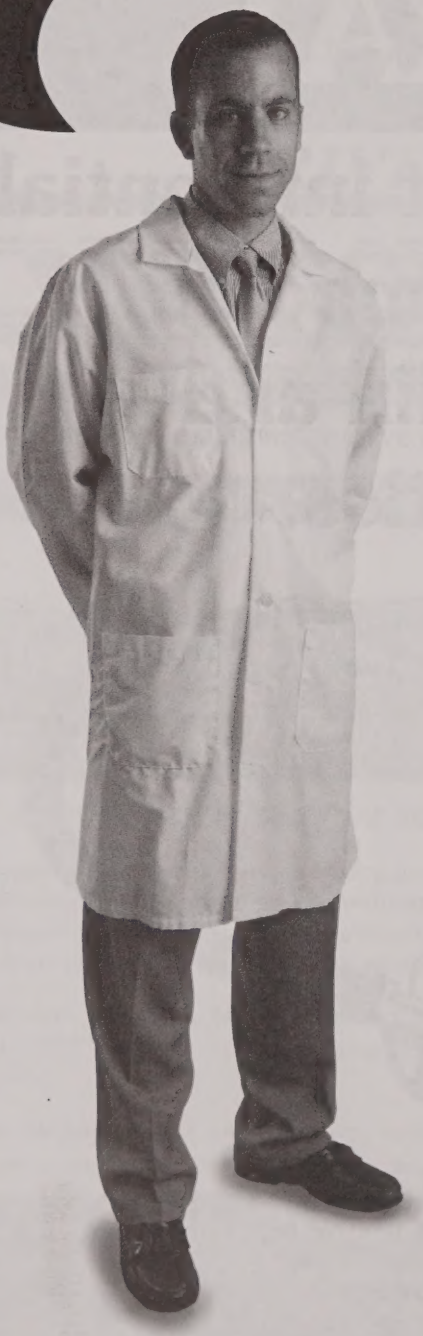


Contact:

Hampden District Medical Society
1111 Elm Street
West Springfield, MA 01089
Tel: 736-0661 • Fax: 731-8990

General Surgeon



Mercy Medical Center is proud to announce the addition of

Daniel M. Morrison, M.D.

to our staff of general surgeons.

He is affiliated with the practice of New England Surgical Group, LLP, which includes Mohamed P. Hamdani, M.D., F.A.C.S.; Karen E. Kupfer, M.D., F.A.C.S.; and John D. Kasper, M.D. The practice is located at 401 Chestnut Street, Suite 1, Springfield, MA.

Dr. Morrison comes to Mercy Medical Center from Manchester Memorial Hospital and Surgical Associates of Manchester (CT). He has training and experience in laparoscopic/minimally invasive procedures, hernia repairs of all types, surgery of the GI tract and an interest in surgery of the thyroid and parathyroid glands.

Dr. Morrison is a graduate of Gordon College in Wenham, MA (1992), and Temple University School of Medicine in Philadelphia, PA (1997). He completed his surgical residency at Lehigh Valley Hospital in Allentown, PA (2002), where he was also the chief surgical resident (June 2001 – June 2002).

He is board-certified and licensed in the states of Connecticut and Massachusetts.

For more information, please call Dr. Morrison at 413-737-8328.

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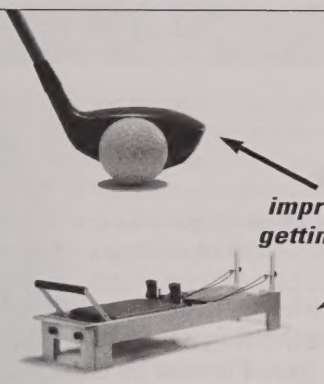

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WorldScopes

Dear Colleagues:

On behalf of the American Medical Association, I am writing to invite your medical society to help us commemorateMedical Ethics Day by promoting ***WorldScopes***.

In cooperation with the AMA Foundation and AMA Alliance, the AMA launched ***WorldScopes*** with a goal of collecting and distributing stethoscopes to physicians and others around the world who lack access to this most basic medical instrument. Over the last year, ***WorldScopes*** has distributed thousands of stethoscopes to hospitals, medical schools, and clinics in places as varied as Guatemala, Iraq, Kosovo, and Uganda.

Last year, the World Medical Association designated September 18 as Medical Ethics Day. To honor that day, last fall, the AMA asked for your help in promoting ***WorldScopes*** as a tangible way to promote that spirit of ethics and professionalism in medicine. Again, we're asking for your help this Medical Ethics Day. If possible, please post the attached icon to your website during the entire month of September, with a link to **www.worldscopes.org**, where your members can purchase and donate a stethoscope for as little as $15.

Additionally, we'd encourage, as many of you did last year, to promote ***WorldScopes*** through your society's newsletter or post an article about ***WorldScopes*** on your website. Once again, Audiey Kao, MD, PhD, AMA Vice President for Ethics Standards and his staff will be coordinating this effort. If you need assistance with promotional articles, or need additional materials-posters, brochures, orimage-formatted advertisements, please email Katherine Rouse at katherine_rouse@ama-assn.org or call 312.464.4075.

Thank you in advance for your help-by working togetherwecanhelpthose struggling to care for the sick and injured around the world.

Sincerely,
Dr. Mike Maves

Member Questionnaire

The Hampden District Medical Society Executive Committee would like to encourage all members who are interested in becoming more involved in shaping our future to please let us know. *Share your ideas, time or both.*

Participation is the key to explore opportunities, which will make a difference in the lives of our patients, physicians and the practice of medicine. With videoconferencing technology available from Holyoke Community College to headquarters in Waltham, having your voice heard is now as easy as making a phone call. Get involved, help create the future.

"A volunteer member organization is only as good as it's members make it."

Please indicate if interested in participating in any of the following committees or positions.

District Committees/ Positions:

- ☐ Executive
- ☐ Medico-Legal
- ☐ Medico-Religious
- ☐ Membership
- ☐ Nominations
- ☐ Public Health
- ☐ Auditing
- ☐ By Laws
- ☐ Publications
- ☐ Hampden Delegate: MMS House of Delegates
- ☐ District Trustee to the MMS Board of Trustees

Hassle Factor Committee

Officer Positions

- ☐ President Elect
- ☐ Vice President
- ☐ Treasurer
- ☐ Secretary

State Committees: District Appointed:

- ☐ Legislation
- ☐ Tax Supported Medical Care
- ☐ Nominations

State Committees: the MMS President appoints Committee members elect from District submitted names.

***There are 35 different committees. For a full list of opportunities, contact Suzanne Skibinski at the Disitrict office. Presently Hampden District Members have appointments to the following committees.**

Ethics & Discipline

- ☐ Finance
- ☐ Geriatric Medicine
- ☐ Information Technology
- ☐ Judicial Committee
- ☐ Managed Care
- ☐ Maternal & Perinatal
- ☐ Medical Service
- ☐ Recognition Awards
- ☐

Inter Specialties

- ☐ Obstetrics & Gynecology
- ☐ Otolarynogology
- ☐ Diversity in Medicine
- ☐ Nutrition
- ☐ Professional Liability
- ☐ Student Health & Sports Medicine
- ☐ Physician Preparedness

State Positions:

- ☐ Massachusetts AMA Delegate/Alternate Delegate
- ☐ Organized Medical Staff Section Representative (OMSS) (Hospital_____)

Name:_____

Mailing Address:_____

Phone: (office)_____ (home)_____ Fax: (___)_____Email:_____

Dr. R.K. Bajwa

for the body as we age.

As a medical spa coordinates the services with the day spa, they become a "one stop shop". Medical spas offer care for hair and nails, but the client can also look into facials, medical microdermabrasion, chemical peels, Botox for facial wrinkles, and fillers for enhancements or wrinkles. Treatments are also possible with lasers for hair removal, photofacials, skin rejuvenation, rosacea, facial and leg veins, and acne treatment. Therapists are available for massages, body treatments, and relaxation care. Today's educated client seeks a more complete approach to health and beauty.

Day spa providers are responding with the variety of health and beauty services from natural/ayurvedic to medical based treatments. Cutting Edge Salon and Day Spa in Feeding Hills is truly at the "cutting edge".

By: Dr. R.K. Bajwa

Join the Fun

Spend Some Quality Time with Your Family!

ANNUAL FAMILY NIGHT
DATE: SEPTEMBER 21, 2004
PLACE: BASKETBALL HALL OF FAME
REGISTRATION: 5:30 P.M.
GUEST: REBECCA LOBO
University of Connecticut & New York Liberty, Women's National Basketball Association basketball player.

CME/Risk Management: The Lake Placid Olympic Training Center
"Is there a Doctor on the Bobsled?"
Catherine O'Connor, M.D.
General Surgeon, Specializing in Sports Injuries

To register call: 736-0661

MERCY NAMES NEW CHIEF NURSING OFFICER

Sharon Adams-Babineau, R.N., B.S., M.A., has been named the new Vice President, Patient Care Services at Mercy Medical Center and the Chief Nursing Officer of the Sisters of Providence Health System.

Prior to coming to Mercy this summer, Adams-Babineau served as Chief Nurse Executive of the Eastern Connecticut Health Network in Manchester, CT.

"I began my nursing career at Mercy. I am excited to be coming back to my community and to work in a community hospital that is very mission-driven," said Adams-Bambina, a resident of East Longmeadow.

She served as a clinical nurse supervisor at the then-named Mercy Hospital in 1990-1991. From 1987 to 1990, she held nursing posts in medical-surgical, pediatric and telemetry at Mercy.
Her professional career has also included serving as vice president, patient care services/chief nurse executive of Rockville General Hospital/Manchester Memorial Hospital and administrator of Rockville General Hospital from 2001 to 2004.

****

THE PILATES METHOD – A CREATURE OF MEDICINE?

Joseph Pilates, the originator of the Pilates Method of body conditioning, was born in Germany and held as an "enemy alien" by the British during World War I. While in an internment camp, Joe Pilates - whose personal history included bodybuilding, gymnastics and boxing - worked with the facility's wounded and bedridden and patients as a lay physical therapist. Building on his knowledge of anatomy, and limited available resources, Pilates developed exercises and improvised apparatus (made from hospital beds) that helped patients recover strength and flexibility while abed.

Early experiments with Joseph Pilates' apparatus and exercises were so successful at patient rehabilitation that he was encouraged by staff physicians to refine his effective methods. In consultation with doctors and his wife Clara (a nurse) Pilates developed a series of exercises he called "Contrololgy".

In 1926 Joe and Clara immigrated to New York and brought the Pilates Method with them. New York dancers embraced Pilates almost immediately. The dance community, a group plagued by injury, found in the Pilates Method a reliable means of preventing and healing occupational injuries. Joe's methods have been lovingly cherished, preserved, and propagated by professional dancers since the 1940's.

Pilates is now the fastest growing exercise in the world. Dancers still use Pilates but world-class athletes and professional sport franchises have also discovered its performance enhancing and rehabilitative power. Pilates has expanded to a wider public. People from all walks enjoy the strength, flexibility, and vitality afforded by regular Pilates practice.

Finally, Joe's methods have found their way back to the world of medicine – from where they emerged. Physical therapists, and medical specialists of every stripe are including Pilates in their healing arsenals.

Pilates has endured and grown for more than 80 years, for one simple empirical reason. It works. More and more people are discovering that fact. Many of those people are employed in the field of medicine.

****

DIABETES AND ENDOCRINE CENTER

In June of this year, Mercy Medical Center launched the Diabetes and Endocrine Center, formerly known as an affiliate of the Joslin Diabetes Center.

The same staff of diabetes professionals continues to maintain a strong commitment and focus on providing excellent care for individuals in Western Massachusetts who have diabetes. Endocrinologists Drs. Catherine Hegarty and Eva Karacsonyi, registered nurses Maureen Gallant and MaryEllen

In Celebration of September being Women in Medicine Month, we invite you to attend a special evening for our Women in Medicine

A Night of Fitness, Fashion, Fun & Relaxation

Date: Thursday, September 23, 2004
Place: Momentum The Pilates Center
380 Union Street, Bdg 32B
West Springfield, Ma
Dinner at 6:00 P.M followed by:
Fashion Show/Sportswear & Workout clothes
Chair Massages, Makeovers & Hair styling
Pilates Demonstration
To register call 736-0661 (space limited)

(Mim) Sheehan, registered dietitians Sharon Tilbe and Mary Ann Sopelak and exercise physiologist Steve Pizzo will continue to provide care and education to area residents with diabetes. In addition, the Center has added the services of psychologist Dr. Amanda Roberts, of Brightside's Medical Psychiatry Service. Dr. Roberts provides individual counseling and support groups. The American Diabetes Association has recognized the education program at the Diabetes and Endocrine Center as meeting national standards for diabetes self-management education. In addition, all of the educators are certified diabetes educators (CDEs).

Education of individuals with diabetes is a primary focus of the Diabetes and Endocrine Center. It is well known that strict glycemic control can prevent or delay the development of diabetes-related complications. Studies such as the DCCT and UKPDS, which conclusively demonstrated the importance of glycemic control, highlighted the importance of a team approach and self-management education as crucial to the success of controlling diabetes. The importance of patient education was also demonstrated in the more recently published Diabetes Prevention Trial, where intensive lifestyle modification was found to decrease the risk of progressing to Type 2 diabetes in individuals at high risk. Treatment of diabetes is multi-factorial and involves a combination of nutrition, physical activity, and oral medications and/or insulin therapy. Successful management of diabetes entails providing ongoing education to patients so that they understand diabetes principles and have the skills, knowledge and motivation to make the best and most informed decisions about day-to-day behaviors which impact control.

Services provided at the Diabetes and Endocrine Center include comprehensive diabetes self-management education; basic skills, such as blood glucose monitoring and insulin administration; basic meal planning and carbohydrate counting; prevention and treatment of acute and long-term complications; and training in intensive insulin management, including a strong insulin pump program. Pregnant women with gestational diabetes or pre-existing diabetes are seen promptly for both education and medical care. Individuals with diabetes can be referred to the Center by their primary care provider for diabetes self-management education and/or medical consultation or ongoing medical care of diabetes with the endocrinologists.

In addition to maintaining the commitment to being an area leader in diabetes care, the name change better reflects the full scope of services provided at the center. Drs. Hegarty and Karacsonyi are board-certified endocrinologists who see a wide variety of endocrine disorders, including diseases of the thyroid, parathyroid, adrenal, and pituitary glands. Although the doctors have been seeing a full spectrum of endocrine disorders since the opening of the diabetes center, the name caused some confusion among referring providers as well as patients regarding the range of disorders seen by the endocrinologists. This provided much of the impetus for the name change.

Dr. Hegarty is a native of Western Massachusetts. She grew up in Wilbraham, graduating from Minnechaug Regional High School in 1984. She received a Bachelor of Science from the University of Massachusetts in Amherst in 1988. During and after college, she did basic science research

Dr. Catherine Hegarty

focusing on reproductive neuro-endocrinology and was a co-author on several publications. She attended the University of Massachusetts in Worcester where she received her M.D. in 1994. She subsequently returned to Western Massachusetts and completed her residency in Internal Medicine and fellowship in Endocrinology, Diabetes and Metabolism at Baystate Medical Center. She became medical director of the Joslin Diabetes Center Affiliate at Mercy Medical Center in 1999 and continues in this role at the Diabetes and Endocrine Center. She credits her interest in caring for individuals with diabetes to her father. He had Type 2 diabetes and developed numerous complications through his lifetime. Seeing this gave her an appreciation of the challenges that people with diabetes face in trying to manage their diabetes and prevent complications in the face of all of the demands of daily life.

Dr. Karacsonyi is a native of Hungary. She graduated from the Semmelweis University Medical School in Budapest in 1988. She began her residency in Internal Medicine in a community hospital in Eastern Hungary. After four years, she moved to the United States with her husband who is an anesthesiologist, and completed a three-year residency program in Internal Medicine at Berkshire Medical Center in Pittsfield. She subsequently completed a fellowship in Endocrinology, Diabetes and Metabolism at Baystate Medical Center in 1998. She returned to Hungary where she worked for a research organization and subsequently moved to England where she worked as a volunteer physician in Diabetes and Endocrinology. She returned to the U.S and joined Dr. Hegarty in the fall of 2001.

By Dr. Catherine Hegarty

(Hampden District Medical Society is not affiliated with any medical facility but we welcome any news that affects patient care.)

****

American Medical Association

Annual National Advocacy Conference

March 14-16, 2005, Washington D.C.

Dr. Claudia Martorell, Chair of HDMS Public Health Committee recently won a seat on the American Medical Association's Minority Affairs Consortium Governing Council. The AMA recently met in Chicago for their Annual Meeting. The Society is proud and congratulates Dr. Martorell for winning this prominent position.

MEDICAL LIABILITY REFORM

To receive updates on Medical Liability Reform go to the AMA website at http://www.ama-assn.org/go/mlrnow.org

Physician Action Kit Sign-Up

The Physician Action Kit is a key component of the AMA's campaign to mobilize physicians and patients across the country in the fight to pass real medical liability reform legislation in the U.S. Congress. The Kit includes:

- **Talking Points:** includes a brief overview of the medical liability issue and key points patients should stress when communicating with their U.S. Senators and Representative.
- **Sample Letter to Patients:** Skyrocketing liability premiums reduce your patients' access to care while simultaneously increasing their

families' health insurance costs. The letter contains language you can use when corresponding with your patients on this subject.

- **Wall Poster and Static Cling Poster:** Highlight for your patients how the liability crisis is affecting their access to healthcare by hanging these posters in highly visible places in your office, such as the reception area.
- **Patient Brochures/Easel Display:** This brochure outlines the medical liability problem and directs patients to additional information. With this brochure patients can also sign up for issue updates via regular mail, e-mail, fax, or by simply completing its tear-off sheet and leaving it with your receptionist.

To order your Kit go to the American Medical Associations website and put in AMA(Washington)Physician Action Kit Sign-Up or call: 800-262-3211.

Just give away what you already have.....

The Hampden District Medical Society and The Massachusetts Medical Society Alliance, the Massachusetts Medical Society and Massachusetts Medical Society & Alliance Charitable Foundation invite and ask you to participate in "**Physicians & Their Families Make a Difference.**" Here is how you can make a difference in the lives of some of the most vulnerable people in your community, the families in your local domestic violence shelters. Survivors of domestic violence, mostly women and children, often have to flee their homes at a moment's notice. Many are not able to bring with them some of the basic comforts we take for granted… Be creative with your donations. What about those personal products you have collected while traveling?

- Comb, brush, shampoo, conditioner
- Deodorant, toothbrush, toothpaste
- Socks & underwear for adults and children
- Children's books and magazines
- Disposable diapers
- Baby food and formula
- Feminine products
- Small luxuries (nail polish, lip gloss, powders, etc.)

Please do it now while you are reading this. Please bring your products to our office at 1111 Elm Street, Suite 22, West Springfield. If you need the items picked up, please contact (413) 736-0661 and we will arrange to pick them up. Together we can make a difference, thank you for your generosity. You are helping our community.

Together, we can make a difference.
HOME is the place where, when you have to go there, they have to take you in.

Robert Frost

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Prescription Advantage

Prescription Advantage, administered by the Commonwealth of MA Executive Office of Elder Affairs, is a prescription drug insurance plan for all MA residents age 65 or older as well as younger individuals with disabilities who meet income and employment guidelines.

Prescription Advantage offers comprehensive prescription drug coverage that is combined with an annual out-of-pocket spending limit to provide affordable prescription drug coverage. Prescription Advantage will conduct an **open enrollment period beginning on September 1 through September 30, 2004.** Your patients' opportunity to join is limited. To join or for more information on Prescription Advantage, call toll free: 1-800-AGE-INFO (1-800-243-4636 or TDD/TTY: 1-877-610-0241. You may also access the website at www.800ageinfo.com.

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2005 HIGH SCHOOL DOCTOR FOR A DAY PROGRAM

Did you have a mentor in your life? Did someone encourage you to go in to medicine? This year, the Hampden District Medical Society and the Massachusetts Medical Society once again are sponsoring the very successful **High School Doctor for a Day** program. We will have another opportunity to share our expertise with young people who have expressed interest in the field of medicine and witness the practice of medicine and to observe the successful physicians who will be their mentors. The High School Doctor for a Day Program is an educational opportunity designed to provide a mentoring experience, for serious junior and senior high school students who are science oriented, during their critical decision-making years. The program is designed to assist young people, especially those who have expressed an interest in medicine, to have an inside look into the complex health-care environment.

Dr. Christopher Comey, who has taken time out of his very busy schedule to participate in the High School Dr. for a Day program for the past several years with 2004 student Laura Hegarty

High School Doctor for a Day Program
Thursday, April 7, 2005

Please fax to: 731-8990 or email your participation to: hdms@massmed.org

NAME: _____

ADDRESS: _____

PHONE: _____

HOME PHONE: _____

EMAIL: _____

FAX: _____

SPECIALTY: _____

TWENTIETH ANNUAL
MEDICAL ETHICS SEMINAR

ETHICAL ISSUES IN ORGAN TRANSPLANTATION
"WHEN THINGS DON'T GO WELL."

PRESENTED BY:

THOMAS DERR, Ph.D.
Professor on Ethics: Smith College

Thursday, October 21, 2004
Mercy Medical Center
Deliso Conference Center
Registration: 6:00 p.m. - 6:30 p.m.
Seminar: 6:30 p.m. - 9:30 p.m.

Member: NoCharge Non-Member $25.00

Name:_____

Address:_____

Phone:_____

Fax:_____

Email:_____

Please fax to: 731-8990

OBITUARIES

Joseph W. Kresock, M.D.
1921-2004

Dr. Joseph W. Kresock a beloved pediatrician in the Springfield area for 34 years died on June 12, 2004. Dr. Kresock received his Medical Degree from Temple Medical School. He was a member of the American Medical Association, the American Academy of Pediatrics, and the Irish – American Medical Society. Prior to retiring in 1987, Dr. Kresock owned and practiced at the Forest Park Pediatrics in Springfield. Both the Hampden District Medical Society and the Massachusetts Medical Society recognized Dr. Kresock in 2002 in commemoration of his Fifty -Year Membership. Contributions may be made to the University of Notre Dame Development Fund, P.O. Box 519, Notre Dame, IN 46556.

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The Scholarship Committee of the Hampden District Medical Society has voted to award the sum of $1,000.00 to the following medical student:

Jennifer Ann Pelli, Junior
Jefferson Medical College, Philadelphia

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Dr. Max & Ida L. Millman Foundation Scholarship Program Recipient:

Jennifer Ann Pelli, Junior
Jefferson Medical College, Philadelphia

Contributions to the Hampden District Medical Society Scholarship Fund would be most welcome...Through your generosity; HDMS will be able to continue helping medical students. Any amount you give will be greatly appreciated.
Please make donations out to:
HDMS Scholarship Fund
Mail to:
Hampden District Medical Society
1111Elm Street, Suite 22
West Springfield, MA 01089

The Society wishes to thank Dr. Douglas Barnshaw for his generous donation

EVER-ELUSIVE BALANCE

"Ibuprofen Mother" is the title of a poem I've been writing in my mind for months. The inspiration is obvious. I take a lot of Ibuprofen. Indeed, I wonder at times why my kidneys continue to function. It's the usual suspects: headache, backache and menstrual cramps. Then there are the additional joys of ovarian cysts, TMJ and carpal tunnel. But this piece is (fortunately for you) not the place for me to write my doggerel.

Instead my task is "Women in Medicine". The two-- i.e. Ibuprofen and women in medicine--are related. Most days most of the time I feel like an old woman. I am thirty-eight.

Dr. Maria Russo-Appel

I am a full time medical director of a growing ambulatory and inpatient division in Medical Psychiatry, the mother of a pre-pubescent boy and a four year old tomboy, a wife of thirteen years, a daughter, a sister, food shopper, director of home finances and (place elliptical dots here).

I exercise once a week if lucky. I justify my large daily chocolate quantities as providing neuroprotective antioxidants. I realized the other day the last time I saw my best friend (also a woman doctor) who lives a mere ninety minutes away was a full year ago. I choose books no longer than two hundred pages or I begin to feel defeated by my two pages per day as I'm falling asleep.

But then there are these moments. After hosting a National Depression Screening Day I began to see a sixty-something woman in my practice for depression. Her PCP had done some blood tests and a chest x-ray for a persistent cough, weight loss and dysphoria. It was winter and she was a smoker. She was diagnosed with bronchitis and depression. She came to each of her four appointments with her husband and daughter. I took the history and began treatment. But it was not adding up to me. I knew something else was wrong. I asked the daughter to insist upon a chest CT. Ultimately, through a series of events the patient ultimately had a bronchoscopy, which showed metastatic lung cancer.

She died one week later. Just before she passed, I went to see the family in the hospital. When I arrived her daughter said to me simply, "Thank you for giving me this week with my mother".

My female doctor friends and I complain often about trying to find the ever-elusive "balance", we resent the fatigue and the aches and wonder if we are truly good at anything anymore. But all it takes is one of these moments

and we realize maybe, just maybe, we really are good physicians.

And suddenly, balance seems overrated.

By: Maria Russo-Appel
Director, Medical Psychiatry
Mercy Medical Center

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WOMEN IN MEDICINE

Dr. Teresa Klick-Nowak

My medical knowledge and experience began with six years at the University School of Medicine in Poznan, Poland, followed by a year of internship and six years of postgraduate training. This brought me the title and degree of Specialist in Internal Medicine and Rheumatology with high honors.

My experience continued with studies in Canada with some of the best Canadian rheumatologists, and more certifications.

Now I practice here in the United States at the Holyoke Medical Center. I continue to stay current by regularly attending rheumatology Grand Rounds at UMass memorial Medical Center, partaking in regional and national conferences and following newest advances in the field to offer my expertise to patients with different rheumatic diseases.

The biggest difference between practicing rheumatology here, and in Poland, is the availability of the most current technology, especially that which facilitates in the diagnostic work-up of the more difficult clinical cases. Here, even smaller community hospitals, like Holyoke Medical Center, have direct access to such aids, whereas in any comparable hospital in Poland, this is not yet within reach. The healthcare system in Poland is currently undergoing major reconstruction to match the standards of care throughout the entire European Union.

Patients in the USA have more options for care than in Poland where the national health system dominate private offices and hospitals that started to emerge within the last few years are not very affordable.

I also concur with the team approach in the diagnosis and management of patients suffering from rheumatic diseases. The cooperation of the specialist such as occupational and physical therapists, ophthalmologists, dermatologists, nephrologists, pulmonologists, neurologists, vocational counselors, social workers etc. along with the rheumatologist and internist secures the optimal therapy for the patient.

Submitted by: Dr. Teresa Klich-Nowak

HDMS 2005 SENIOR VOLUNTEER PHYSICIAN OF THE YEAR!

This honor is given to a physician who demonstrates a commitment to volunteerism and a dedication to sharing experiences and medical expertise with his/her community. The chosen recipient will be honored at the January 25, 2005, Winter Meeting. If you would like to nominate a Senior Volunteer Physician for this award, please submit nominations with a brief letter of explanation to:

Suzanne Skibinski, Executive Director
Hampden District Medical Society
1111 Elm Street, Suite 22
West Springfield, MA 01089
Fax: (413) 731-8990
Email: hdms@massmed.org

SAVE THE DATE!!!

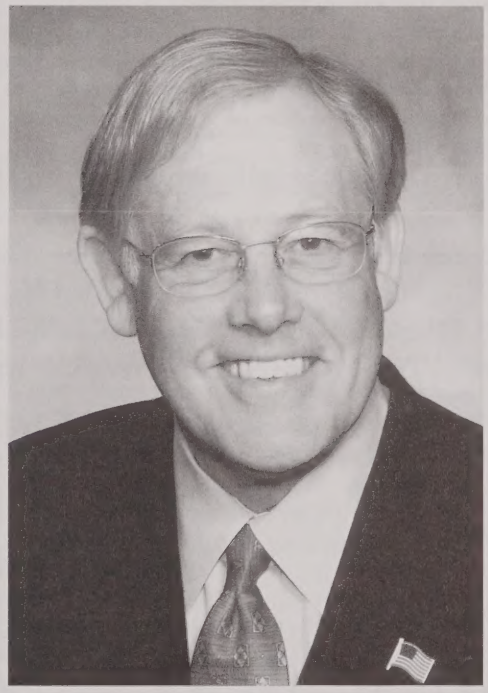
Join your colleagues, State Officials, MMS Officers, and members of your New England AMA Delegation for the:

January 25, 2005 Winter Meeting

Best Western Sovereign Hotel & Conference Center
Route 5 West Springfield

Healing the System: The AMA Plan to Rescue U.S. Medicine

Presented By: J. Edward Hill, M.D.
AMA President-Elect



Dr. J. Edward Hill the 159th American Medical Association's next president is a board-certified family physician.

He began his professional career in the rural Mississippi Delta where he practiced for 25 years. In addition to full service family practice, Dr. Hill developed a local maternal child health program that resulted in lowering the fetal mortality rate from one of the most highest in the United States to below the national average where it remained. His dedication to patient care has been recognized in both his home state and at national level, as evidenced by having received such awards as " Mississippi Family Doctor of the Year" in 1991 and runner-up for Good Housekeeping magazine's "Family Doctor of the Year" in 1977.

Due to his wealth of medical practice experience and recognition as a role model for young doctors, Dr. Hill was asked in January 1995, to become Director of the Family Practice Residency Program at North Mississippi Medical Center, which is the nation's largest rural hospital.

In addition to his active participation in the American Medical Association, Dr. Hill has served in a variety of leadership positions in the American Medical Association and other medical organizations.

Please plan on attending this very important program and welcome Dr. Hill.

Have You Met the Alliance?

The Massachusetts Medical Society Alliance (MMSA) is a dynamic organization of physicians' spouses who give of their time and talents to promote good health in their communities, and to advance the health and well being of the medical family. Our chief projects this year will be health literacy and assisting victims of domestic violence.

What are the rewards of membership?

- Meeting new people with shared concerns and developing lasting friendships
- Support for your medical family through educational conferences and materials
- Satisfaction and fulfillment at having made a difference
- Learning new skills that can be applied to any arena

You can choose your level of involvement

- Take our award-winning materials into schools and help children learn about conflict resolution and good health habits.
- Bring our materials to health fairs and help to educate your communities, make them safer, and offer support.
- Take a leadership role.
- Support a local shelter and help the homeless or victims of domestic violence.
- Contact your legislator and help advocate for good medical care for all.
- Pay your dues and let us know you support our efforts. The greater our numbers, the louder our voice.

All physician spouses are cordially invited to join.

For more information, contact Candace Savage, 800-322-2303, x7017 (781-434-7017), or csavage@mms.org

DR. JOHN P. SULLIVAN 2004 OLIVER WENDELL HOLMES, M.D. STETHOSCOPE AWARDEE

The world has come to know the wit and philosophy of "Dr. Oliver Wendell Holmes" and many would say Dr. John P. Sullivan could be his reincarnation.

Dr. Sullivan, a forty-five year member of the Society has been chosen as the 2004 recipient of the Society's "Oliver Wendell Holmes, M.D. Stethoscope Award". Born in Bridgeport Connecticut, he was raised in Holyoke and Springfield and graduated from Cathedral High School. Upon graduating from St. Anselm's College he attended Tufts University School of Medicine. He began his internship at Carney Hospital in Boston and did residency programs at Carney Hospital, SUNY at Syracuse, Cambridge City Hospital, Albany Hospital and New York State Health Dept Laboratories. In 1957 Dr. Sullivan completed a Fellowship at Memorial Sloan Kettering Cancer Center.

His hospital appointments included Chief of Pathology at, Holy Name Hospital, New Jersey, Springfield Hospital, Medical Center of Western MA and Baystate Medical Center. Dr. Sullivan was also a consultant at Noble, Shriners, Wing, Springfield Municipal, Ludlow, Western MA Hospital, VA Hospital, Leeds and Wesson Memorial Hospital. He retired in 1997 as Medical Director and pathologist at Greater Springfield Pathology.

Dr. Sullivan serves on the Board of Directors at the Springfield Boys & Girls Club where he is also the camp doctor and a recipient of the Springfield Boys Club Alumni Fred Stephenson Award.

During his long career Dr. Sullivan served on many state and local committees including the HDMS Executive, Medico-Legal Committee and Public Health Committee where he is currently a member and represents the Society on Springfield's MMRS Pandemic and Biological Committee.

Dr. Sullivan proposed the creation of Baystate Medical Center's Emeritus Club who recently received the 2004 Distinguished Achievement Award from the Catalyst Institute for Innovation and Excellence.

Hampden District Medical Society congratulates Dr. Sullivan for his outstanding dedication and commitment to his community and the medical profession.

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ON THE LIGHTER SIDE OF MEDICINE

The search is on...again

In the past five years my husband and I have lost three doctors. Three of our primary care physicians, all very competent, all highly intelligent doctors have decided for various reasons to call it quits. So my husband and I have been left holding the medical bag, so to speak, wondering whom we should turn to this time.

I don't think we are unique. I suspect that with insurance companies pulling the strings, with rising malpractice insurance rates that doctors must pay, with the stress of long hours and less reimbursements, the best and the brightest may decide that medicine is not the career for them. And who could blame them? It used to be that being a doctor had a level of prestige attached to it but the increased status seems to pale in comparison with the negatives these professionals must endure.

It's become sort of like public office. I can't help but wonder, who would want to go into that field today?

Luckily my husband and I are healthy people. We eat right, we exercise regularly, we even take vitamin supplements. We are rarely sick. But we do feel rather abandoned now that our third letter from a doctor has arrived, notifying us that he is "going to pursue other interests," rather than checking our reflexes on a yearly basis or swabbing us for strep when our throats get the better of us. So now what? How do we go about finding a suitable replacement?

We know what we want in an M.D. Ideally we want the person who was top in their class in medical school, is aware of traditional and new approaches to ailments, and can carry on a conversation that typical people can understand. She should have an appropriate sense of humor, listen when we describe our presenting problem, and take our insurance. He should be able to squeeze us in when we call in the morning complaining of an earache, knowing that we cannot miss work for more than a day, and recommend a specialist when he feels whatever we have would better be seen by someone with a particular expertise. She must have nurses who are less like guard dogs and more like assistants and who know us and remember our first names and how to pronounce them. Am I still in Kansas or has my house and mind stopped spinning?!

The point is that neither my husband nor I know how to find all of this in a primary care physician. Both of us feel we should be able to interview our perspective doc but with our clothes ON and not with those little skimpy johnnies on that barely cover all of our parts. Somehow wearing one of those makes our minds go blank and causes us to forget that we are articulate, professionals and leaves us nodding instead like bobble headed dogs. We forget to ask questions or say we don't understand or to ask, "were you at the class where they talked about rashes or did you cut that one because you stayed out too late the night before." I know how it can be after all; I teach college.

So far we have one strategy for finding our new doctor-word of mouth. My husband asks everyone he sees who their doctor is and if they like him. So far the responses can be categorized in two ways: very efficient but no personality or very, very nice but not that innovative. What happens if we want both? Should be call our insurance company and tell them we want to designate two doctors-one that has bedside manner and one that is really intelligent but lacking in the personality department? I think they would either drop us immediately as policyholders or give us the number for a psychiatrist

covered on their plan.

The other day I was in a doctor's office that was clean, efficient, and well staffed. Everyone there was friendly and helpful. I was squeezed in, seen within five minutes of my scheduled appointment, and my questions were answered thoroughly by competent, friendly doctors who spoke regular English rather than medical jargon.

I told my husband that night at dinner that I had found what we had been looking for in our search for health care. If only it hadn't been at our dog's veterinary clinic!

By: Carol LaLiberte
Chicopee Register Columnist

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EMPLOYEE HANDBOOK - A DOUBLE EDGED SWORD? ONLY IF CARELESSLY CRAFTED

One of the most common questions healthcare professionals ask counsel is whether or not it is advisable to establish an employee handbook. Yes, however, great care must be taken when drafting a document that may one day be challenged.

Employee manuals are a tool to help convey expectations of employee treatment by managers. A handbook also helps inform managers of legal obligations. Through it, an employer can set forth-unambiguous expectations about company policies and suggest specifics about how situations should be handled.

A potentially damaging inclusion within a handbook is language that infers it is a contract. Thus, it is recommended that non-competition or confidentiality agreements and any other contract information be created separately. If included in a manual, such agreements could effectively turn the entire manual into a contract. Also, employees should sign a separate statement that they have received and read the employee manual, that it is not a contract, and that they understand their employee status is "at-will".

"At will," means that employer or employee may terminate the relationship at any time and for any reason. This should appear in a prominent place in an employee manual.

Avoiding several buzzwords helps protect employers. "Cause," "probationary," "orientation", "training," "contract," and "agreement" can cause problems by inferring an employment contract exists. Promises of regular performance reviews and raises is another employer's trap, as they may cause hardship. In addition, harassment policies, benefits, safety regulations and other State and Federal regulations should be included.

This article may be read in it's entirely at bacon-wilson.com.

Michelle M. Begley, Esquire, is a member of Bacon & Wilson, P.C's Litigation Department. Her areas of expertise include employment law and employee/employer issues. She can be reached at 413-781-0560 or mbegley@bacon-wilson.com.

Gary L. Fialky, Esquire, is chairman of Bacon & Wilson, P.C's Corporate Department. His practice is concentrated in business law, with an additional concentration in health care law. He can be reached at 413-781-0560 or gfialky@bacon-wilson.com.

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MERCY MEDICAL CENTER ANNOUNCES NEW DEDICATED BRAIN, SPINE AND NEUROSCIENCE NETWORK

Reading, riding a bike, walking, even talking - all that one does is dictated by a three-pound mass of tissue inside our skulls and the 100 billion neurons within that send messages throughout our bodies. When something goes wrong in the brain or nervous system, life is altered.

Mercy Medical Center announces the formation of a new Brain, Spine and Neuroscience Network, linking a comprehensive range of services and physicians to provide the latest treatment and care.

Patients, families and physicians who enter this network of services will be referred to physicians with expertise in the patient's specific disorder or condition. Neurologists, neurosurgeons and orthopedic specialists will all be utilized in consultation to create and monitor the pathway of diagnosis, treatment, rehabilitation and follow-up care to restore patients to the best quality of life possible.

Mercy's Brain, Spine and Neuroscience Network provides a portal into the neuroscience and neuromedical expertise provided through the physicians, health professionals, surgical teams and advanced technologies at Mercy Medical Center.

Mercy's neurological experts offer a level of coverage allowing 24/7 coverage by neurosurgeons, said James E. Fanale, M.D. chief operating officer of Mercy Medical Center and chief medical officer for the Sisters of Providence Health System. "At Mercy, the depth of the neurological team allows physicians surety that they and their patients will have expert back-up available, 24-hours-a-day, seven-days-a-week," said Fanale.

"Nobody else can offer what Mercy can offer. Mercy is unique," said Dr. Savvas Papazoglou, Mercy's chief of neurosurgery.

Mercy Medical Center has an historical and demonstrated commitment to provide advanced imaging technology for use during the diagnostic process. Mercy provides advanced medical tools and equipment in the surgical suites. Mercy Medical Center recently acquired and installed "neuro-navigator" equipment for its operating room, a device that allows surgeons to pinpoint the lesion or tumor for treatment without damaging surrounding tissue.

What makes Mercy special is that teams of operating room nurses and assistants specialize in neurosurgery, which means that neurosurgeons work repeatedly with the same nurses and operating room team members and are able to rely on their expertise with the tools, conditions and surgeons. "If the doctor is happy and confident in the hospital, its technology and the operating team, than the patient is better off," said Fanale.

The neurologists affiliated with the Mercy Brain, Spine and Neuroscience Network will treat complications of Lou Gehrig's Disease; Parkinson's Disease and Multiple Sclerosis. Other conditions treated are spastically, stroke, geriatric conditions, brain aneurysms, brain tumors and brain hemorrhages. Swallowing disorders, movement disorders, even sleep disorders and face pain and spasms are part of the complex sensitive network that involves the brain and nervous system.

Orthopedists, neurologists, spine surgeons and neurosurgeons will help patients with brain and spine problems in non-surgical and surgical treatment of problems, including herniated discs, neck and back problems and spinal stenosis, is a narrowing of spaces in the spine or backbone that results in pressure on the spinal cord and/or nerve roots which can cause pain or numbness in the legs or upper body, depending on the area involved.

And just across the parking lot from Mercy Medical Center, rehabilitation therapists at the 60-bed inpatient and outpatient service, Weldon Rehabilitation Hospital, work with the physicians to ensure patients maximize their care and treatment to achieve the highest quality of life and self-sufficiency possible.

For more information about the Brain, Spine and Neuroscience Network and the services available at Mercy Medical Center for brain, spine and nervous system treatment, call the referral coordinator at 413-748-6802 and/or toll-free, 866-306-6802.

Calling for nominations for:

2005 Hampden District Medical Society Award for "Community Clinician of the Year"

This annual award is sponsored by the Massachusetts Medical Society and Hampden District Medical Society and **recognizes a physician who has made significant contributions to patients and the community.** Candidates must be members of the HDMS to qualify. The recipient *chosen by their district colleagues* to receive the ***Award for Community Clinician of the Year*** will be presented their Award at our Annual District Spring Meeting. In addition the award recipient will also be recognized at the Annual MMS Meeting held in May.

Please submit nomination along with a supporting letter by January 25, 2005 to:
hdms@massmed.org
Or mail to:

Suzanne Skibinski, Executive Director
Hampden District Medical Society
1111 Elm Street, Suite 22
West Springfield, Massachusetts 01089-1540

The Hampden Hippocrat Newsletter
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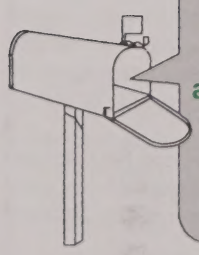

Please contact us with address changes at: 413-736-0661.

Our Hampden Women In Medicine